| PATENT APPLICATION SEE DETERMINATION                                            |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          | Application or Docket Number |                                                  |          |                     |                        |  |  |
|---------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------|----------|------------------------------|--------------------------------------------------|----------|---------------------|------------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003          |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          |                              |                                                  |          |                     |                        |  |  |
| CLAIMS AS ELLED DADEL                                                           |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          |                              | <u> </u>                                         | _6       | 202                 | 6                      |  |  |
|                                                                                 |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  | _        | SMALL ENTITY TYPE            |                                                  | OF       | OTHER THAN          |                        |  |  |
| TOTAL CLAIMS                                                                    |                                                |                                           | 12             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ·            |                  |          | RATE                         | FEE                                              | ٦        | RATE                | FEE                    |  |  |
| F(                                                                              | OR                                             |                                           | NUMBE          | R FILED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | NUM          | BER EXTRA        |          | BASIC F                      | EE 385.00                                        | OF       | BASIC FEE           | 770.00                 |  |  |
| TOTAL CHARGEABLE CLAIMS                                                         |                                                |                                           | 12 "           | \                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                  |          | X\$ 9=                       |                                                  | OR       | X\$18=              |                        |  |  |
| INDEPENDENT CLAIMS                                                              |                                                |                                           | minus 3 =      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          | X43=                         |                                                  | ٦,,,     | X86=                |                        |  |  |
| MULTIPLE DEPENDENT CLAIM PR                                                     |                                                |                                           | PRESENT        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          | -145-                        | <del>                                     </del> | 7        |                     |                        |  |  |
| * If the difference in column 1 is less that                                    |                                                |                                           |                | zero, enter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | "0" in       | column 2         |          |                              |                                                  | <b>-</b> | <u> </u>            | 770                    |  |  |
| ,                                                                               | 19.0 K                                         |                                           |                | <b>L</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                  | THAN     |                              |                                                  |          |                     |                        |  |  |
|                                                                                 | 7 DIVO                                         | (Column 1)                                |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              | (Column 3)       |          | SMAL                         | ENTITY                                           | OR       | _                   |                        |  |  |
| AMENDMENT A                                                                     | ( ) ·                                          | CLAIMS REMAINING                          |                | NUME<br>—PREVIO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | BER<br>USLY- | PRESENT<br>EXTRA |          | BATE                         | ADDI-<br>TIONAL<br>FFF                           | ].       | _RATE               | ADDI-<br>_TIONAL       |  |  |
|                                                                                 | Total                                          | . 19                                      | Minus          | -20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1)           | =                |          | XS 9=                        |                                                  |          | XS18=               | , , , ,                |  |  |
|                                                                                 | Independent                                    | . 4                                       | Minus          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3            | = /              |          | X43-                         | <del> </del>                                     | 1        |                     | 280                    |  |  |
| ٩                                                                               | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  | }        |                              | <del> </del>                                     | OR       | ^QD=                | J00                    |  |  |
| 113 114,20                                                                      |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          | +145=                        | <u> </u>                                         | OR       | +290=               |                        |  |  |
|                                                                                 |                                                | ' 1                                       |                | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              | •                | ۵        |                              | 2                                                | OR       | TOTAL<br>ADDIT. FEE | 2000                   |  |  |
| - 1                                                                             |                                                | (Column 1)                                | <del>-</del>   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              | (Column 3)       | ì _      |                              |                                                  |          |                     |                        |  |  |
| AMENOMENT B                                                                     |                                                | REMAINING<br>AFTER<br>AMENDMENT           |                | NUMB<br>PREVIOU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ER<br>JSLY   | PRESENT<br>EXTRA |          | RATE                         | ADDI-<br>TIONAL<br>FEF                           |          | RATE                | ADDI-<br>TIONAL<br>EEE |  |  |
|                                                                                 | Total                                          | •                                         | Minus          | **                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              | = '              |          | XS 9=                        | 1 32                                             |          | X\$18=              | 1,55                   |  |  |
| ME                                                                              | Incependent                                    | •                                         | Minus          | awa .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              | =                | ┟        |                              | · ·                                              | ł        |                     |                        |  |  |
|                                                                                 | FIRST PRESE                                    | NTATION OF MU                             | JETIPLE DEI    | PENDENT (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | CLAIM        |                  | -        | 743=                         |                                                  | OR       | · ^60=              |                        |  |  |
|                                                                                 |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  | L        | +145=                        | ·                                                | OR       | +290=               |                        |  |  |
|                                                                                 |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  | A        |                              |                                                  | OR ,     | TOTAL<br>ADDIT. FEE |                        |  |  |
| <b>,</b>                                                                        |                                                | (Column 1)                                | ·              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              | (Column 3)       |          |                              |                                                  |          |                     | 1                      |  |  |
| MEN                                                                             |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | NUMBE<br>PREVIOU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | R<br>SLY     | PRESENT<br>EXTRA |          | RATE                         | ADDI-<br>TIONAL                                  |          | RATE                |                        |  |  |
|                                                                                 | Total                                          | •                                         | Minus          | **                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              | =                | 上        | Y\$ 0_                       |                                                  | _        | V610                | PEE                    |  |  |
|                                                                                 | independent                                    | •                                         | Minus          | ***                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |              | -                | $\vdash$ |                              |                                                  | OR       |                     |                        |  |  |
|                                                                                 | FIRST PRESE                                    | NTATION OF MU                             | -              | X43=                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              | OR               | X86=     |                              |                                                  |          |                     |                        |  |  |
| +145=                                                                           |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          |                              |                                                  | OR       | +290=               |                        |  |  |
| []                                                                              | ine Highest Nur                                | nber Previously Pai                       | d For' IN THIS | SFILED - PART   (Column 1) (Column 2)   SMALL ENTITY   TYPE   SMALL ENTITY   SMALL ENTITY   TYPE   SMALL ENTITY   SMALL ENTITY   SMALL ENTITY   TYPE   TYPO   TYP |              |                  |          |                              |                                                  |          |                     |                        |  |  |
| tille mighest number Previously Paid For IN THIS SPACE is less than 3 acres 13. |                                                |                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                  |          |                              |                                                  |          |                     | SMALL ENTITY           |  |  |
|                                                                                 |                                                | •                                         |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              | J                |          | сър                          | - Springe DUA                                    |          |                     |                        |  |  |